Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

| CLAIMS AS FILED - PART I (Column 1) (Column   |  |   |                  |                      |                              | mn 2)            | SMALL ENTITY TYPE                    |                     |                        | OR    | OTHER THAN SMALL ENTITY |                        |
|---|--|---|------------------|----------------------|------------------------------|------------------|--------------------------------------|---------------------|------------------------|-------|-------------------------|------------------------|
| TOTAL CLAIMS  |  |   |                  |                      |                              |                  | ı                                    | RATE                | FEE                    | 1     | RATE                    | FEE                    |
| FOR   |  |   | NUMBER FILED     |                      | NUMBI                        | NUMBER EXTRA     |                                      | BASIC FEE           | 370.00                 | OR    | BASIC FEE               | 740.00                 |
| TOTAL CHARGEABLE CLAIMS   |  |   | minus 20=        |                      | *                            |                  |                                      | X\$ 9=              |                        | OR    | X\$18=                  |                        |
|   | EPENDENT CL  | · · · ·                                   | minus 3 =        |                      | *                            |                  |                                      | X42=                |                        | OR    | X84=                    |                        |
| MULTIPLE DEPENDENT CLAIM PRESENT  |  |   |                  |                      |                              |                  |                                      | +140=               |                        | OR    | +280=                   |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2  |  |   |                  |                      |                              |                  | TOTAL                                |                     | OR                     | TOTAL |                         |                        |
|   | CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) |   |                  |                      |                              |                  | OTHER TO<br>SMALL ENTITY OR SMALL EN |                     |                        |       |                         |                        |
| AMENDMENTA  |  | CLAIMS REMAINING AFTER AMENDMENT          |                  | HIGH<br>NUM<br>PREVI | HEST<br>HBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA |                                      | RATE                | ADDI-<br>TIONAL<br>FEE |       | RATE                    | ADDI-<br>TIONAL<br>FEE |
|   | Total  | * / 6                                     | Minus            |                      | 0                            | =                |                                      | <b>X\$</b> 9=       | *                      | OR    | X\$18=                  |                        |
| AME   | Independent  | * X                                       | Minus            | ***                  | T CL AIM                     | =                | _                                    | X42=                |                        | ÖŖ    | X84=                    |                        |
|   | THOT FRESE   | INTATION OF IM                            | JETTP LE DET     | LINDLIN              | CLANV                        |                  |                                      | +140=               |                        | OR    | +280=                   | /                      |
|   |  |   |                  |                      | ·                            |                  | ,                                    | TOTAL<br>ADDIT. FEE |                        | OR    | TOTAL<br>ADDIT. FEE     |                        |
|   |  | (Column 1)                                |                  |                      | mn 2)                        | (Column 3)       |                                      |                     | •                      |       |                         |                        |
| AMENDMENT B   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                  | NUM<br>PREVI         | HEST<br>IBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA |                                      | RATE                | ADDI-<br>TIONAL<br>FEE | ٠.    | RATE                    | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *   | Minus            | **                   |                              | =                |                                      | X\$ 9=              |                        | OR    | X\$18=                  | ·                      |
| AME   | Independent  | *   | Minus            | ***                  |                              | =                |                                      | X42=                |                        | OR    | X84=                    |                        |
| L   | FIRST PRESE  | NTATION OF MU                             | JLTIPLE DEF      | PENDEN               | T CLAIM                      | <u> </u>         | J                                    | +140=               |                        | OR    | +280=                   |                        |
|   |  |   |                  |                      |                              |                  | L                                    | TOTAL<br>ADDIT. FEE |                        | OR    | TOTAL<br>ADDIT. FEE     |                        |
|   |  | (Column 1)                                |                  | (Colu                | mn 2)                        | (Column 3)       | de <b>"</b>                          |                     |                        |       | ADDI į. I ELI           |                        |
| AMENDMENT C   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                  | NUM<br>PREVI         | HEST<br>IBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA |                                      | RATE                | ADDI-<br>TIONAL<br>FEE |       | RATE                    | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *   | Minus            | **                   |                              | =                |                                      | X\$ 9=              |                        | OR    | X\$18=                  |                        |
|   | Independent  | *   | Minus            | ***                  | T OL 4114                    | =                | 11                                   | X42=                |                        | OR    | X84=                    |                        |
| L.  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +140=         |   |                  |                      |                              |                  |                                      |                     | OR                     | +280= |                         |                        |
| *   | f the entry in colu  | mn 1 is less than the                     | né entry in colu | mn 2, writ           | e "0" in col                 | umn 3.           | . L                                  | TOTAL               |                        | 00    | TOTAL                   |                        |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |  |   |                  |                      |                              |                  |                                      |                     |                        |       |                         |                        |



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07977/047003

| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |   |   |                                       |                               |                      |                     |               | SMALL ENTITY TYPE |                        | OR              | OTHER THAN OR SMALL ENTITY |                        |
|---|---|---|---------------------------------------|-------------------------------|----------------------|---------------------|---------------|-------------------|------------------------|-----------------|----------------------------|------------------------|
| TOTAL CLÁIMS  |   |   |                                       |                               |                      |                     |               | RATE              | FEE                    |                 | RATE                       | FEE                    |
| FO  | R   |   | NUMBER FILED                          |                               | NUMBER EXTRA         |                     |               | BASIC FEE         | 355.00                 | OR              | BASIC FEE                  | 710.00                 |
| ТО  | TAL CHARGEA   | BLE CLAIMS                                | / minus 20=                           |                               | *                    |                     |               | X\$ 9=            |                        | OR              | X\$18=                     |                        |
| INDEPENDENT CLAIMS / min  |   |   |                                       |                               | <u> </u> *           | •                   |               | X40=              |                        | OR              | X80=                       |                        |
| MULTIPLE DEPENDENT CLAIM PRESENT  |   |   |                                       |                               |                      |                     |               | +135=             |                        | OR              | +270=                      |                        |
| * If the difference in column 1 is less than zero, enter "0" in   |   |   |                                       |                               |                      | column 2            | L             | TOTAL             |                        | OR              | TOTAL                      | 764                    |
| CLAIMS AS AMENDED - PART II   |   |   |                                       |                               |                      |                     | OTHER THAI    |                   |                        |                 |                            |                        |
|   |   | (Column 1)                                |                                       | (Colu                         |                      | (Column 3) SMALL EN |               |                   | NTITY                  | OR              | SMALL                      | ENTITY                 |
| ENT A   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                       | HIGH<br>NUM<br>PREVIO<br>PAID | IBER<br>OUSLY        | PRESENT<br>EXTRA    |               | RATE              | ADDI-<br>TIONAL<br>FEE |                 | RATE                       | ADDI-<br>TIONAL<br>FEE |
| AMENDMENT   | Total   | . 16                                      | Minus                                 | *R                            | $\bigcirc$           | =                   |               | X\$ 9=            |                        | OR              | X\$18=                     |                        |
| AME   | Independent   | . 97                                      | Minus                                 | *** &                         | <u></u>              | 5                   |               | X40=              |                        | OR              | X80=                       | 4000 B                 |
| L   | FIRST PRESE   | NTATION OF MI                             | JLTIPLE DEF                           | PENDEN                        | T CLAIM              |                     | ]             | +135=             |                        | OR              | +270=                      |                        |
|   |   |   |                                       |                               |                      |                     |               | TOTAL             |                        | 4,              | TOTAL                      | 400,00                 |
|   |   |   |                                       |                               |                      |                     |               | DDIT. FEE         |                        | OR <sub>.</sub> | ADDIT. FEE                 | 0,000,00               |
| $\overline{}$   | (Column 1) (Colum<br>CLAIMS HIGH  |   |                                       |                               | (Column 3)           | 1 г                 | <del> 1</del> | ADDI-             |                        |                 | ADDI                       |                        |
| AMENDMENT B   | -   | REMAINING<br>AFTER<br>AMENDMENT           |                                       | PREVI                         | IBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA    |               | RATE              | TIONAL<br>FEE          |                 | RATE                       | ADDI-<br>TIONAL<br>FEE |
|   | Total   | *   | Minus                                 | **                            |                      | =                   |               | X\$ 9=            |                        | OR              | X\$18=                     |                        |
| \ME   | Independent   | *   | Minus                                 | ***                           |                      | =                   | ┇╏            | X40=              |                        | OR              | X80=                       |                        |
| Ľ   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |                                       |                               |                      |                     | ┚┞            | +135=             |                        |                 | +270=                      |                        |
|   |   |   |                                       |                               |                      |                     | L             | TOTAL             |                        | OR              | TOTAL                      |                        |
|   |   |   |                                       |                               |                      |                     |               | DDIT. FEE         |                        | OR              | ADDIT. FEE                 | <b>9</b> 3             |
|   |   | (Column 1)                                | · · · · · · · · · · · · · · · · · · · | (Colu                         |                      | (Column 3)          |               |                   | 44 44 44               |                 |                            |                        |
| AMENDMENT C   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                       | PREVI                         | BER<br>OUSLY<br>FOR  | PRESENT<br>EXTRA    |               | RATE              | ADDI-<br>TIONAL<br>FEE |                 | RATE                       | ADDI-<br>TIONAL<br>FEE |
| NON   | Total   | *   | Minus                                 | **                            |                      | =                   | П             | X\$ 9=            |                        | OR              | X\$18=                     |                        |
| ME  | Independent   | *   | Minus .                               | ***                           | ٠                    | =                   |               | X40=              |                        |                 | X80=                       |                        |
| Ĺ   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |                                       |                               |                      |                     | ┇╟            | 7.10-             |                        | OR              |                            |                        |
|   | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |   |                                       |                               |                      |                     |               |                   |                        | OR              | +270=                      |                        |
| ** If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." |   |   |                                       |                               |                      |                     |               |                   |                        |                 |                            |                        |
|   | The "Highest Num  | ber Previously Pá                         | id For" (Total o                      | r Independ                    | lent) is the         | e highest numbe     | er four       | nd in the app     | ropriate box           | in co           | lumn 1.                    |                        |